

Benefits Education  
Phone:  
(609) 777-2111  
Benefits Education  
Fax:  
(609) 292-9500

## Retirement Workshop 2005 Registration For PFRS Employees

Return Form To:  
Division of  
Pensions and Benefits  
Benefits Education  
PO Box 295  
Trenton, NJ 08625-0295

**Preregistration for retirement workshops is required.**

**Pension Fund** *(select one):*

☐ Police and Firemen's Retirement System (PFRS)

**Member Information:**

Name *(first, last)*: \_\_\_\_\_

Date of Birth *(mm/dd/yyyy)*: \_\_\_\_\_

Social Security Number *(xxx-xx-xxxx)*: \_\_\_\_\_

Expected Retirement Date: The first day of \_\_\_\_\_

*(Retirement date must be the first day of a month and within the next twelve months.)*

*This date is for estimate purposes only and is not an application for retirement.)*

E-Mail Address: \_\_\_\_\_

Daytime Phone Number *(include Area Code)*: \_\_\_\_\_

**Pension Beneficiary Information:**

*(By providing this information we will be able to calculate a retirement estimate that includes payment options to a surviving beneficiary.)*

Spouse's Name: \_\_\_\_\_

Spouse's Date of Birth *(mm/dd/yyyy)*: \_\_\_\_\_

Will your spouse attend with you? ☐ Yes ☐ No

**Choose Seminar Date:**

*(You will receive directions to the seminar location upon confirmation of enrollment.)*

**Seminars for 2005**

June 21 (9:30 a.m. to 12:00 p.m.) - FULL

☐ July 19 (9:30 a.m. to 12:00 p.m.)

☐ September 8 (9:30 a.m. to 12:00 p.m.)

☐ October 4 (9:30 a.m. to 12:00 p.m.)

☐ December 5 (9:30 a.m. to 12:00 p.m.)